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APPLICANTS

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Yes R.R.

** CONTINUING DATA *****

None R.B.

** FOREIGN APPLICATIONS *****

None R.B.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: <i>R.B.</i> Initials: <i>R.B.</i>	STATE OR COUNTRY WA	SHEETS DRAWING 12	TOTAL CLAIMS 62	INDEPENDENT CLAIMS 6
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TITLE

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FILING FEE RECEIVED 1834	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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